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First MHAT in the Pacific

Mental Health Advisory Teams, or MHATs, are a unique tool used by the Army to conduct rapid assessments that benchmark the behavioral health status of Service members in remote and stressful environments. Results from MHATs deliver key information and timely recommendations to military senior leaders to promote psychological health and resilience. MHATs also provide researchers a platform to better understand emerging behavioral health threats and contemporary challenges faced by Service members and leadership.

A team of eight MRD-W and WRAIR Center for Military Psychiatry and Neuroscience (CMPN) researchers traveled to the Republic of Korea (ROK) to conduct the fourteenth MHAT mission and first MHAT in the Pacific region.

MHAT-Korea was requested by the Deputy Commanding General of U.S. Forces Korea (USFK), in response to concerns about behavioral health issues and a perceived spike in suicidal behaviors.

Over two months, the combined team conducted surveys and focus groups with all seven major subordinate commands of the U.S. 8th Army and conducted an assessment of the Army behavioral health service line. Special focus on staffing, access to care, suicidality, and risk and resilience factors related to behavioral health status and comparisons to other MHAT settings was requested by the USFK Command Surgeon.

The MHAT-K team collected over 1,600 surveys from 8th Army Soldiers as well as nearly 60 surveys from behavioral health staff. They also conducted over 20 focus groups with Soldiers and behavioral health providers throughout the ROK. The initial results were briefed to leadership from 8th Army, PACOM, and Regional Health Command-Pacific (RHC-P) in March. The final report was completed in May.



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Updating the UBHNA

The Unit Behavioral Health Needs Assessment (UBHNA) is a tool utilized by behavioral health officers (BHO) to monitor health and well-being, and identify areas of concern to provide leadership with unit-specific guidance. This tool was developed by the Walter Reed Army Institute of Research (WRAIR) ten years ago and is undergoing an update in design, accessibility, and comparison data.

Part of a larger effort to update the UBHNA, MRD-W is collaborating with WRAIR's Center for Military Psychiatry and Neuroscience (CMPN) and the Fort Hood Field Office to incorporate updated scales into the tool and pilot the new instrument. Data collected during the development stage will support the establishment of a new, normative database to replace data collected in the mid-2000s in order to reflect the current operational climate.

In support of this effort, MRD-W conducted several information gathering sessions with BHOs and company commanders from the 593rd Expeditionary Sustainment Command (ESC) to assess the current behavioral health climate and solicit feedback on utilization of and optimization plans for the tool.

To date, MRD-W has collected of over 1,500 surveys using the first version of the revised instrument from units within the 593rd ESC.



Small Team Culture Study

MRD-W is supporting WRAIR on a new study examining the effects of small-team culture on unit climate, health and well-being, and performance during gunnery range training. Initial pilot studies were conducted during Stryker Brigade Combat Team (SBCT) gunnery range qualifications in September and October at Ft. Carson. Data collection included pre-, during, and post- training surveys, crew after action review feedback, and range qualification data among a total of 17 Stryker crews across both data collections.

The goal of the study is to develop a validated model of small-team emotional and cognitive culture that can be used to inform a follow-on study with developed tools to support leaders in managing small-team culture.

With pilot studies complete, the next data collection will occur in early 2017 with tank Armored Brigade Combat Team (ABCT) gunnery range qualification training taking place in Europe.

In addition, the research will include objective measures of sleep quantity and quality through the utilization of wristworn actigraphs. Members from MRD-W will continue to support WRAIR in this latest study endeavor.



Director's Corner

On 07 OCT 2016, we celebrated the one year anniversary of the activation of the U.S. Army Medical Research Directorate-West (MRD-W) at JBLM. This inaugural issue of the "WRAIR West" newsletter represents the continued excellence that MRD-W has carried forward from the many years of service that the U.S. Army Medical Research Unit-Europe (USAMRU-E) provided in Germany. We have successfully rebuilt the research team and our partnership with the Center for Military Psychiatry and Neuroscience (CMPN) at our headquarters at the Walter Reed Army Institute of Research (WRAIR) is stronger than ever.

This issue highlights some of the key achievements of the new directorate since its establishment at JBLM, including leading the first Mental Health Advisory Team (MHAT) mission in the Republic of Korea and conducting a behavioral health assessment of students at the Defense Language Institute Foreign Language Center. I look forward to working with our key operational partners at one of the Army's premier force projection platforms to continue to explore ways to improve the lives of Service members and their families.

MAJ Matt LoPresti, Acting Director

Working with DLIFLC

The Defense Language Institute Foreign Language Center (DLIFLC) at the Presidio of Monterey in central California uses accelerated programs to train military personnel from all branches of service to become proficient in specific foreign languages. DLIFLC provides resident instruction in two dozen languages with in-classroom training five days a week, seven hours a day, as well as two to three hours of homework each night.

Given the rigorous schedule, DLIFLC students face a unique set of stressors while they complete their condensed language acquisition programs, leading to significant utilization of the limited behavioral health resources at the Presidio.

In response to these concerns, MRD-W was requested by Madigan Army Medical Center (MAMC) leadership to conduct an assessment at DLIFLC to benchmark the behavioral health and well-being of the student population.

The initial assessment of the Army student population has been completed, and the results and recommendations have been presented to DLIFLC and MAMC leadership.

A second, cross-service assessment including all students at DLIFLC is being planned for spring 2017.



Sleep Leadership Project

MRD-W is developing a pilot training program and follow-on study to examine the degree to which leaders who emphasize and prioritize sleep can have a positive impact on the behavioral health of their Soldiers.

This study is part of an ongoing Behavioral Health Leadership Project that will assess various domains of leadership behaviors, beyond general good leadership qualities. The project includes the development and use of targeted training to encourage specific behaviors and a variety of assessments to validate the effectiveness of the training.

In December, MRD-W solicited feedback from behavioral health officers and platoon-level leadership teams at JBLM on the development of training modules for sleep leadership behaviors.

In addition, MRD-W is collaborating with the Oregon Health & Science University (OHSU) on their study using a work-family and sleep leadership intervention with the Oregon National Guard. MRD-W is supporting this study by providing technical and analytical support for an actigraphy-based sleep assessment.

Each of these projects focus on helping leaders develop skills to emphasize the importance and value of sleep with their subordinate Service members.

Ultimately, the aim is to achieve improved sleep for better-rested Service members, and a more ready force as a result of leadership emphasis on this important health issue.

Return to Duty Decision Making Tools

Military medical providers are constantly evaluating Soldiers for medical readiness. The Army has explicit guidelines for physical and psychological fitness to deploy and to remain on duty. Providers are also afforded the ability to impose duty limitations and change such limitations when appropriate. These duty limitations can have an impact on both mission readiness and on the individual Soldier's career. Given the magnitude of the career related impact of changes to duty status and the Army's need to maintain a physically and mentally fit force, an understanding of the current process is critical.

MRD-W is supporting CMPN's Military Psychiatry branch in the development of readiness tools that will be among the first to provide information on the current practices being used to make duty limitations or changes for a behavioral health reason, particularly in a garrison environment. A qualitative study has been completed that allows us to understand the current scope and practice of behavioral health provider decision-making. Currently, MRD-W and Military Psychiatry are in the process of developing tools to augment clinical decision-making, potentially increasing the efficiency and validity of return to duty decisions.

Staff Spotlight

Ms. Maura Taylor

Ms. Taylor joined the MRD-W team in March 2016, transitioning from her former position at the WRAIR. Maura's ability as a Research Assistant (RA) seems to have no limit as she continues to acquire knowledge and skills at an impressive rate. Building



on her previous experience with using actigraphy to measure sleep in laboratory settings, Maura has become an invaluable asset to MRD-W research operations by mastering actigraphy collection not only in controlled environments but also in the field. She is the lead RA on the DLIFLC project, a complex multidisciplinary endeavor, as well as the unit's lead on the development and implementation of web-based surveys.



Ms. Michelle Ganulin

Ms. Ganulin joined the MRD-W team in July 2016 bringing unique skill sets to the team from her time as an Air Force Officer and with a background in mathematics. In addition to supporting MRD-W studies as a Research Associate (RA), Michelle fills two crit-

cal roles for the directorate. First, her advanced statistical skills provide our Principal Investigators an in-house consultant for the development of methodological approaches for examining datasets for novel findings. Second, Michelle's general computer expertise led to the director designating her as the unit information technology manager. Michelle has proven herself to be invaluable in both of these roles and has ensured that the entire team has the hardware and software they need to complete the mission by deftly navigating the complex DoD approval and acquisition process.

Material has been reviewed by the Walter Reed Army Institute of Research. There is no objection to its presentation and/or publication. The opinions or assertions contained herein are the private views of the author, and are not to be construed as official, or as reflecting true views of the Department of the Army or the Department of Defense.

Aligning Best Practices

MRD-Wis working with partners at WRAIR to align best practices. This means taking a close look at how our researchers, principal investigators, administrative officers, and leadership collect, label, process and store information.

A huge undertaking with many moving parts and an expansive team, the ultimate goal is to ensure consistency across the field. This level of consistency will enable any team member from any branch to be able to "plug and play" no matter where they are.



ABOUT US

The U.S. Army Medical Research Directorate-West is the Army's forward-positioned behavioral health research team that can rapidly respond to the needs of the operational community.

With our small and effective unit at JBLM and our reach-back capabilities to our headquarters at WRAIR, we are uniquely positioned to conduct applied research to protect, optimize and enhance Service member psychological health, resilience and well-being.

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